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Impaired-Driving Program Assessments

A Summary of Recommendations (1991 to 2003)

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16. Abstract The National Highway Traffic Safety Administration (NHTSA) developed an assessment process that gives States an opportunity to conduct a review of their efforts to control impaired driving by an outside team of nationally recognized experts. Each assessment examines a State's overall program and presents recommendations to improve or enhance it. NHTSA reviewed 38 State assessment reports and found 2,982 individual recommendations, including 852 that were identified as priority recommendations by the teams. Most of the recommendations fit into 10 thematic areas: (1) increasing deterrence by prioritizing enforcement efforts and enhancing the arrest, prosecution, and adjudication process; (2) improving public information and education efforts related to prevention and deterrence; (3) remedying problems involving DUI data and records (reporting requirements, offender tracking systems, data linkages, uniform traffic citations); (4) enacting new laws or revising existing laws aimed at increasing the deterrence and/or prevention of DUI; (5) enhancing training for law enforcement, prosecution, and judicial personnel; (6) evaluating programs and activities to combat impaired driving; (7) providing sufficient resources for treatment and rehabilitation; (8) improving inter/intra-governmental coordination and cooperation; (9) providing funding (including self-sufficiency) to provide for adequate resources (personnel, equipment); and (10) developing or increasing task forces and/or community involvement.					
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EXECUTIVE SUMMARY

I. Introduction. As part of its goal to reduce alcohol-related traffic deaths and injuries, the National Highway Traffic Safety Administration (NHTSA) developed an assessment process that gives States an opportunity to conduct a review of their efforts to control impaired driving by an outside team of nationally recognized experts. Similar assessments are conducted also in other highway safety areas, including occupant protection, emergency medical services, motorcycle safety and traffic records.

Upon State request, NHTSA convenes the assessment team and facilitates the process. The assessment team meets with State officials including highway safety personnel, and hears testimony from individuals invited by the State to testify concerning the strengths and weaknesses of the State's program. The team then uses this information to assess the State's impaired-driving program. Each assessment examines the strengths and weaknesses of a State's overall impaired-driving program. It should be noted that these assessments are not typical or traditional program evaluation efforts (i.e., process or outcome evaluations, etc.). Assessments contain recommendations, some of which have been designated as priority recommendations, concerning ways in which the State can improve or enhance its impaired-driving programs. Since the assessment report "belongs" to the State, it is solely within the State's discretion how it will use the document. There are no sanctions if the State does not implement the recommendations. Based on State requests, NHTSA has facilitated 42 impaired-driving assessments since 1991, including 32 initial assessments and 10 re-assessments.

II. Background.

a. Assessment Process. The assessment process begins when a State Highway Safety Office submits a written request to one of the NHTSA Regional Offices. This request is then referred to the appropriate program office at NHTSA headquarters to initiate the assessment process. NHTSA selects and convenes a multidisciplinary assessment team consisting of experts from outside the agency. The team's experience correlates with the various components of a comprehensive impaired-driving program that are reviewed during the assessment process.

The requesting State arranges for State impaired-driving program representatives to meet with the assessment team during the weeklong technical review. The State representatives brief the assessment team and, as appropriate, provide written materials. Team members may initiate an open discussion with presenters to gain a clearer understanding of a subject.

The assessment team uses the information provided by these representatives to analyze the State's impaired-driving program by comparing it to a NHTSA-developed uniform guideline. The team members develop consensus recommendations (including priority recommendations) after considering what reasonably could be accomplished within the State and what actions are most likely to have an impact. While the uniform guidelines are the same for each State, the assessment team considers unique State factors that may impact the applicability of the State to adopt certain recommendations. These factors may include, but are not limited to, demographics, geography, political structure, and institutional support for impaired-driving activities. The assessment team then develops a written report containing its consensus

recommendations, and the report is provided to the State Highway Safety Office.

b. Uniform Guidelines. The Highway Safety Act of 1966 called on NHTSA to promulgate uniform standards for highway safety. In 1976, the Act was amended to provide more flexibility. The amendment provided that the uniform standards were to become more like guidelines for the States to use. This change was codified in 1987, changing the uniform standards to uniform guidelines.

Uniform Guideline Number 8 (**see Appendix A**) of the State Highway Safety Program provides that each State, in cooperation with its political subdivisions, should have a comprehensive program to combat impaired driving. Guideline Number 8 describes the five standard program areas that State impaired-driving activities should address, including: (1) Program Management; (2) Prevention; (3) Deterrence; (4) Driver Licensing; and (5) Treatment and Rehabilitation. States are encouraged to use these guidelines as a framework for problem identification, countermeasure development, and program evaluation.

Since 1991, assessment teams have used these NHTSA-developed guidelines to assess the status of State impaired-driving programs. The team compares State activities to these guidelines, and assesses each of the five areas individually as well as the inter-relationship between them. These guidelines were considered to be state-of-the-art when they were last published. They are currently in the process of being updated to reflect more recent changes in the impaired-driving arena.

III. Study Purpose. Each assessment examines the strengths and weaknesses of a State's overall impaired-driving program. Assessment teams seek to develop a variety of recommendations, including priority recommendations, for a State to use for the enhancement or improvement of its impaired-driving program. Therefore, the recommendations invariably address areas of need or weakness. This study effort was an attempt to sort, categorize, and quantify the very large number of diverse and often complex recommendations by guideline area. This includes summarizing the many recommendations and identifying those that are prevalent across the many States. The results of this effort are intended to assist NHTSA in a review of the assessment process and to serve as a catalyst for potential enhancements to the process. In turn, an improved assessment process will better help States to determine ways to improve the effectiveness and efficiency of their impaired-driving programs.

IV. General Findings. There were 2,982 recommendations produced in 38 (out of 42) examined assessment and re-assessment reports, including 852 that were identified as priority recommendations by the assessment teams. Two assessments were completed too late to be part of this effort (Illinois 2003 and Puerto Rico 2003). Records could not be located for two others (American Samoa 1991 and Utah 2001).

The number and breadth of recommendations reflect broad areas of impaired-driving program needs and limitations. In general terms, most of the recommendations fit into one of 10 broad thematic areas. Some of these themes (e.g., DUI data and records) cut across several different guideline

areas. These themes include (listed in descending order based on number of recommendations):

(1) increasing the deterrence effect by prioritizing enforcement efforts and enhancing the arrest, prosecution, and adjudication process;

(2) providing or improving public information and education efforts related to prevention and deterrence;

(3) remedying problems involving DUI data and records (data reporting requirements, offender tracking systems, data linkages, uniform traffic citations, etc.);

(4) enacting new laws or revising existing laws aimed at increasing the deterrence and/or prevention of DUI;

(5) increasing or enhancing training for law enforcement, prosecution, and judicial personnel;

(6) evaluating programs and activities associated with the effort to combat impaired driving;

(7) providing sufficient resources for treatment and rehabilitation (screening, diagnosis, treatment, availability, trained treatment personnel);

(8) improving inter/intra-governmental coordination and cooperation regarding DUI efforts;

(9) providing funding (including self-sufficiency) to provide for adequate resources (personnel, equipment); and

(10) developing or increasing task forces and/or community involvement.

SECTION ONE - GENERAL

I. COMPLETED ASSESSMENTS. *Table 1* lists the 32 Statewide impaired-driving assessments and the 10 re-assessments that have been completed since 1991 (as of October 2003).

TABLE 1

STATEWIDE IMPAIRED-DRIVING PROGRAM ASSESSMENTS

(as of 10/03)

Alaska (10/94)	Maryland (5/00)*	Oklahoma (12/95)
American Samoa (12/91) +	Michigan (10/96)	Oregon (3/94)
Arizona (9/92)	Minnesota (8/95)	Puerto Rico (10/03) +
California (12/91)	Minnesota (2/03)*	Rhode Island (6/03)
Colorado (9/93)	Missouri (4/99)	South Carolina (9/02)
Connecticut (2/93)	Montana (5/94)	Tennessee (2/99)
Connecticut (11/00)*	Montana (10/01)*	Texas (11/92)
Delaware (5/01)	New Mexico (11/91)	Utah (12/01) +
Georgia (12/93)	New Mexico (6/95)*	Vermont (12/01)
Hawaii (6/98)	New Mexico (6/02)*	Virginia (7/99)
Illinois (3/95)	North Carolina (5/95)	West Virginia (10/93)
Illinois (9/03)* +	North Carolina (4/02)*	West Virginia (2/99) *
Indiana (11/01)	North Dakota (6/01)	Wisconsin (10/93)
Maryland (9/91)	Ohio (3/02)	Wisconsin (4/03)*

* - Re-assessment

+ - Not examined (assessment was in process or record was unavailable)

II. RECOMMENDATION COMPILATION. The categorization and quantification of assessment recommendations has been problematic at best. To begin with, there is no constant or universal set of laws that govern how individual States should seek to address the problem of impaired driving. When developing their recommendations, assessment team members had to consider the diverse and complex factors in each State that influence and have an impact on the effectiveness of impaired-driving programs. For example, each State has its own government structure, body of laws, political structures, and court system organization. State impaired-driving program efforts are impacted by resource issues, current enforcement efforts, demographics, geography, institutional traditions, and highway crash injury and fatality rates. In addition, comprehensive efforts to address impaired driving consist of multiple interrelated approaches, including prevention, deterrence, enforcement, prosecution, adjudication, and treatment. In turn, each of these approaches addresses different programs or activities. For example, the enforcement approach involves both traffic-related enforcement and alcohol beverage control.

III. NUMBER OF RECOMMENDATIONS BY GUIDELINE AREA. As shown in *Table 2*, 2,982 recommendations (including 852 priority recommendations) were produced in the examined assessments. *Appendix B* lists the number of recommendations by category for each guideline area. *Appendices C through G* contain the complete compilations of specific recommendations for each of the respective guideline areas.

There were numerous recommendations made for each of the five uniform guideline areas. As shown in **Table 2**, Guideline Area 3 (Deterrence) produced the largest number of recommendations, accounting for nearly 42 percent of all recommendations and also 42 percent of all priority recommendations. This is nearly twice as many as the second largest guideline area (Program Management), which produced 22 percent of the recommendations. The remaining three guideline areas produced smaller proportions of all recommendations - Prevention (19 percent), Driver Licensing (11 percent), and Treatment and Rehabilitation (7 percent). The proportion of recommendations within each guideline area that were identified as priority recommendations was fairly consistent, ranging from 26 percent to 34 percent.

Based solely on the number of recommendations shown in **Table 2**, it is not possible to identify the relative strength or weakness among the five guideline areas. A large number of recommendations does not necessarily indicate overall guideline area weakness and a small number does not necessarily indicate strength. The number of recommendations may instead reflect the overall importance of a particular guideline area (e.g., deterrence) and breadth of its various components.

TABLE 2

NUMBER OF RECOMMENDATIONS BY GUIDELINE AREA

	Total Number of <u>Recommendations</u>	Number of Priority <u>Recommendations</u>	Percent that are <u>Priority</u>
Program Management	647	178	28%
Prevention	556	147	26%
Deterrence	1238	354	29%
Driver Licensing	345	106	31%
Treatment And Rehabilitation	196	67	34%
Total Number Of Recommendations	2982	852	29%

SECTION TWO - DETAILED FINDINGS FOR EACH GUIDELINE AREA

I. GUIDELINE AREA 1 - PROGRAM MANAGEMENT. NHTSA Highway Safety Program guidelines provide that each State's impaired-driving program management system should establish a process for managing its planning, program control, and evaluation activities. The system should address Safe Communities programs, State and local task forces, data analysis and funding.

A. ANALYSIS. Guideline Area 1 (Program Management) contains six components: State Program Planning; Program Control; State and Local Task Forces and Safe Communities Programs; Data and Records; Evaluation and Funding. The assessments produced 647 recommendations under this guideline area (see **Table 3**). Of these, 178 were identified as priority recommendations by the assessment teams. **Appendix C** contains a complete compilation of recommendations for Guideline Area 1.

There are numerous recommendations for each of the six Guideline Area 1 components (ranging from 52 to 156). The components that produced the greatest number of recommendations were Area 1A (State Program Planning) and Area 1D) Data and Records. Both components produced a greater than

proportional share of recommendations, with a significant (25 percent or more) portion of them identified as priority recommendations.

Higher than proportional numbers of recommendations were generated regarding Area 1C (State/Local Task Forces and Safe Communities Programs), though a smaller percentage of these recommendations were identified as priority recommendations. A relatively small number of recommendations were generated regarding Area 1F (Funding), but a significant portion of the recommendations (25 percent or more) were identified as priority recommendations. Specifically:

- Area 1A (State Program Planning) produced 21 percent of all Program Management recommendations and 29 percent of Program Management priority recommendations. Also, 37 percent (51 of 138) of 1A recommendations were priority recommendations.

- Area 1D (Data and Records) produced 24 percent of all Program Management recommendations and 30 percent of Program Management priority recommendations. Also, 34 percent (53 of 156) of 1D recommendations were priority recommendations.

- Area 1C (State and Local Task Forces and Safe Communities) produced 124 recommendations, amounting to 19 percent of all Program Management recommendations.

- Area 1F (Funding) produced 52 recommendations and 29 percent (15) of them were priority recommendations.

TABLE 3

**NUMBER OF RECOMMENDATIONS FOR GUIDELINE AREA 1
PROGRAM MANAGEMENT**

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
1A - State Program Planning	138	51	37%
1B - Program Control	86	16	19%
1C - State and Local Task Forces and Safe Communities Programs	124	26	21%
1D - Data and Records	156	53	34%
1E - Evaluation	91	17	19%
1F - Funding	<u>52</u>	<u>15</u>	<u>29%</u>
Total Guideline Area 1 Recommendations	647	178	28%

B. 1A - State Program Planning. Per NHTSA Highway Safety Guidelines, States should develop and implement an overall plan for all impaired-driving activities.

There were 138 recommendations produced in the assessments for Guideline Area 1A, including 51 priority recommendations. In general, the State Program Planning recommendations were centered around improving impaired-driving programs/efforts by: (1) developing or revising governmental

organization structures; (2) developing and/or improving coordination of planning activities and (3) improving the management/direction of resources. Recommendations made 10 or more times for this guideline area include (in descending order):

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
• Take steps to better coordinate State program planning (intergovernmental, government/public partnerships, etc.).	25	11	44%
• Improve use of crash/impaired-driving data (accessibility, usage, data resources, evaluation of, ensure validity, etc.).	21	3	14%
• Expand/improve State's PI&E efforts, develop plans, strategies, hire PI&E specialists, gain public support, etc.).	14	3	21%
• Create/enact/revise legislation to strengthen efforts to combat DUI (varied).	13	8	62%
• Create/reorganize governmental structure to enhance efforts to combat DUI.	12	7	58%

C. 1B - Program Control. Per NHTSA Highway Safety Guidelines, States should have established procedures for systematic monitoring and reviewing ongoing programs to ensure that program activities are implemented as intended.

There were 86 recommendations produced in the assessments for Guideline Area 1B, including 16 priority recommendations. In general, the State Program Control recommendations involved: (1) providing for the systematic monitoring of impaired-driving programs and identification of problems; (2) disseminating data and publicizing or sharing results and (3) providing or encouraging training and workshops for management and staff. Recommendations made ten or more times for this guideline area include (in descending order):

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
• Develop/continue/improve ability to monitor and report on impaired-driving programs.	26	3	12%
• Increase availability of information (sharing, dissemination practices, data reporting, etc.).	19	4	21%
• Increase/provide/attend training for State management, staff, grantees, project managers, etc.	12	2	17%

D. 1C - State and Local Task Forces and Communities Programs. Per NHTSA Highway Safety Guidelines, States should encourage the development of State and community impaired-driving task forces and Safe Communities Programs.

There were 124 recommendations produced in the assessments for this guideline area, including 26 priority recommendations. The recommendations revolved around: (1) providing support or encouragement in the development and/or expansion of community programs/task forces (funding, technical support, advice, partnerships, etc.); (2) publicizing program and task force efforts; (3) encouraging partnership development and (4) using program feedback. Recommendations made ten or more times for this guideline area include (in descending order):

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
• Provide/increase State support and assistance to safe communities programs and/or task forces.	24	3	13%
• Provide training/conduct workshops (training for safe communities teams, police, information exchange).	18	4	22%
• Provide/increase publicity of DUI Task Force and/or safe communities programs.	16	3	19%
• Encourage/promote partner participation in safe communities coalitions.	15	3	20%
• Coordinate efforts of various impaired driving task forces/safe communities, consolidate effort where possible.	13	4	31%
• Perform program evaluations, review programs, gather/examine feedback.	11	1	9%
• Increase number and/or expand successful Safe Communities programs.	10	2	20%

E. 1D - Data and Records. Per NHTSA Highway Safety Guidelines, States should establish and maintain records systems for crashes, arrests, dispositions, driver licenses, and vehicle registrations. Especially important are tracking systems that can provide information on every driver arrested for DUI to determine the disposition of the case and compliance with sanctions. These record systems should be accurate, timely, able to be linked to each other, and readily accessible to police, court, and planners.

There were 156 recommendations produced in the assessments for Guideline Area 1D, including 53 priority recommendations. The majority of Data and Records recommendations involved maintaining or improving accessibility to relevant data and records. Multiple recommendations were made to: (1) establish a DUI records/tracking system; (2) develop/improve linkages between various records systems; (3) make those records more easily accessible for law enforcement and the courts; (4) require standardized crash and BAC

reporting and (5) conduct a Traffic Records Assessment. Recommendations made ten or more times for this guideline area include (in descending order):

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
• Develop/improve data linkages between various records systems (e.g., DOT, DMV, courts, police, treatment facilities).	34	8	24%
• Require/enhance/revise crash and/or BAC reporting requirements.	27	4	15%
• Develop/improve DWI offender and/or citation records tracking system.	18	12	67%
• Recommendations regarding management, activity coordination, overseeing data and records systems development/improvement.	18	12	67%
• Compile or analyze data to evaluate data systems, determine or document alcohol problems, related costs, crash rates, injury data, etc.	13	2	15%
• Enhance data accessibility for State, court, law enforcement, community highway safety program personnel.	12	6	50%
• Conduct Traffic Record Assessment or implement Traffic Record Assessment recommendations.	10	4	40%

F. 1E - Evaluation. Per NHTSA Highway Safety Guidelines, States should evaluate all impaired-driving system activities regularly to ensure programs are effective and resources are allocated appropriately.

There were 91 recommendations for Guideline Area 1E, including 17 priority recommendations. In general, the recommendations for Evaluation involved: (1) regularly planning for and conducting program evaluations; (2) reporting results to program management for use in guiding program activities; (3) publicizing results and (4) seeking evaluation assistance from different sources of expertise. Recommendations made 10 or more times for this guideline area include (in descending order):

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
• Collect/utilize data to evaluate programs.	21	3	14%
• Require evaluation of impaired-driving activities or programs.	15	2	13%
• Develop evaluation plans (long term, unified, etc.).	13	1	8%
• Report/publicize results of evaluations.	12	1	8%

- Seek evaluation assistance from other agencies, universities, NHTSA, etc.). 12 4 33%
- Ensure use of appropriate evaluation methodologies, milestones, benchmarks, etc. 11 3 27%

G. 1F - Funding. Per NHTSA Highway Safety Guidelines, States should allocate funding to impaired-driving programs that is adequate for program needs, steady (from dedicated sources) and, to the extent possible, paid by the impaired drivers themselves. The program should work toward becoming self-sufficient.

There were 52 recommendations produced in the assessments for Guideline Area 1F, including 15 priority recommendations. The majority of Funding recommendations involved: (1) encouraging the use of offender fees to promote the self-sufficiency of impaired-driving program efforts; (2) taking steps necessary to gain Federal funding and (3) funding program evaluations and/or performing cost-benefit analyses. Recommendations made 10 or more times for this guideline area include (in descending order):

	Total Number of Recommendations	Number of Priority Recommendations	Percent that are Priority
• Use offender fees to fund impaired driving programs.	11	3	27%
• Adopt self-sufficiency efforts.	11	4	36%

II. GUIDELINE AREA 2 - PREVENTION. NHTSA Highway Safety Program guidelines provide that each State should implement a system of impaired-driving prevention programs and is strongly encouraged to work with the public health community to foster good health (less alcohol and drug usage) and reduce traffic-related injuries.

A. ANALYSIS. Guideline Area 2 (Prevention) consists of five components: Public Information and Education for Prevention; School Programs and Community Youth Programs; Employer Programs; Alcohol Availability and Service; and Transportation Alternatives. **Table 4** shows that 556 recommendations were produced in this guideline area. Of these, 147 were priority recommendations. **Appendix D** compiles all Prevention recommendations.

There are numerous recommendations in each of the five Guideline Area 2 components (ranging from 74 to 171). Areas 2A, 2B, and 2D generated 72 percent of all Guideline Area 2 recommendations and at least 25 percent of the recommendations within each of these areas were priority recommendations. Specifically:

- Area 2D (Alcohol Availability and Responsible Service) contains 31 percent of all Prevention recommendations and 41 percent of Prevention priority recommendations. Also, 36 percent (61 of 171) of 2D recommendations were priority recommendations.

- Area 2A (Public Information and Education for Prevention) contains 22 percent of all Prevention recommendations and 22 percent of Prevention

priority recommendations. Also, 26 percent (32 of 125) of 2A recommendations were priority recommendations.

- Area 2B (School Programs and Community Youth Programs) contains 19 percent of all Prevention recommendations and 21 percent of Prevention priority recommendations. Also, 30 percent (31 of 105) of 2B recommendations were priority recommendations.

TABLE 4

**NUMBER OF RECOMMENDATIONS FOR GUIDELINE AREA 2
PREVENTION**

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
2A - Public Information and Education for Prevention	125	32	26%
2B - School Programs and Community Youth Programs	105	31	30%
2C - Employer Programs	81	10	12%
2D - Alcohol Availability and Service	171	61	36%
2E - Transportation Alternatives	<u>74</u>	<u>13</u>	<u>18%</u>
TOTAL GUIDELINE AREA 2 RECOMMENDATIONS	556	147	26%

B. 2A - Public Information and Education for Prevention. Per NHTSA Highway Safety Guidelines, States should develop and implement public information and education programs directed at impaired-driving. Programs should start at the State level and extend to the communities through State assistance, model programs and public encouragement.

There were 125 recommendations produced in the assessments for Guideline Area 2A, including 32 priority recommendations. Nearly 25 percent of these recommendations involved improving or expanding agency and/or interagency PI&E planning and coordination efforts. Other significant groupings of recommendations included: (1) developing and implementing Statewide PI&E plans; (2) establishing Statewide PI&E Coordinator positions or PI&E staffing increases; (3) developing messages to promote public awareness and (4) evaluating PI&E activities. Recommendations made 10 or more times for Guideline 2A include (in descending order):

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
• Expand/improve agency or interagency PI&E planning and coordination efforts.	30	6	20%
• Develop/implement Statewide PI&E plans.	15	8	53%
• Establish Statewide PI&E Coordinator positions/increase other PI&E staffing.	13	6	46%
• Encourage business/advocacy/school involvement in PI&E efforts.	13	1	8%

- Develop messages to promote public awareness of DUI risks, health consequences, etc. 13 3 23%
- Evaluate PI&E activities. 12 2 17%

C. 2B - School Programs and Community Youth Programs. Per NHTSA Highway Safety Guidelines, States should ensure that education and support of student programs, preschool through college and trade schools, play a critical role in preventing impaired driving.

There were 105 recommendations for Guideline Area 2B produced in the assessments, including 31 priority recommendations. In general terms, the largest recommendation groupings for Guideline Area 2B involved: (1) interagency/intergovernmental involvement in youth programs; (2) development and implementation of alcohol and drug education programs for K-12 and college students; and (3) evaluating program efforts. Recommendations made 10 or more times for Guideline 2B include (in descending order):

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
• Provide/develop interagency or inter-governmental coordination of, or involvement in youth programs.	19	6	32%
• Develop/implement/expand K-12 alcohol and drug education programs.	16	7	44%
• Evaluate school and/or youth programs.	16	4	25%
• Promote development of alcohol and/or drug education programs for college students.	12	3	25%

D. 2C - Employer Programs. Per NHTSA Highway Safety Guidelines, States should provide information and technical assistance to all employers, encouraging them to offer programs to reduce impaired driving by employees and their families.

There were 81 recommendations for Guideline Area 2C produced in the assessments, including 10 priority recommendations. In general, the largest recommendation groupings for Guideline Area 2C involved: (1) State encouragement or assistance in developing or expanding employer traffic safety/NETS programs; (2) development of employer/employee public awareness programs/activities and (3) improve/expand partnership development and/or collaboration (State/local government and businesses, community programs and business leaders, etc.). Recommendations made 10 or more times for Guideline 2C include (in descending order):

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
• Develop/expand NETS programs/employer traffic coordination of/involvement in youth programs.	20	3	15%

- Expand/promote employer/employee public awareness. 19 1 5%
- Expand/promote collaboration with employers to expand/enhance programs. 16 3 19%
- Encourage/assist in development of programs for small employers. 10 1 10%

E. 2D - Alcohol Availability and Responsible Alcohol Service. Per NHTSA Highway Safety Guidelines, States should promote responsible alcohol service policies and practices in the retail alcohol service industry, including package stores, restaurants and taverns, through well-publicized and enforced laws.

There were 171 recommendations for Guideline Area 2D, including 61 priority recommendations. In general terms, the majority of recommendations produced in this area fall into one of several major themes or categories: (1) develop programs/legislation or review existing laws that control or restrict alcohol availability or service particularly to those under 21; (2) require or develop training for alcohol sellers and servers; (3) develop/enact Dram Shop¹ or social host liability laws; and (4) revise/use alcohol tax revenue to help fund prevention programs. Recommendations made 10 or more times for Guideline 2D include (in descending order):

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
• Develop/expand/improve programs, efforts, legislation, to control alcohol sales and service to those under 21.	23	9	39%
• Revise State alcohol beverage tax; use surcharges on DUI education, enforcement, prosecution, etc.	18	10	56%
• Establish/require mandatory training for sellers and/or servers of alcohol.	16	3	19%
• Enact Dram Shop legislation.	14	7	50%
• Require beer keg registration.	13	3	23%

F. 2E - Transportation Alternatives. Per NHTSA Highway Safety Guidelines, States should promote alternative transportation programs that enable impaired individuals to reach their destination without driving.

There were 74 recommendations for Guideline Area 2E, including 13 priority recommendations. The large majority of recommendations for Guideline Area 2E revolved around: (1) discouraging alcohol consumption by designated drivers and over-consumption by anyone; (2) promoting or expanding designated driver or other safe alternative programs and (3) ensuring that

¹ Dram Shop is a term that refers to the liability of establishments, arising from the sale of alcohol to obviously intoxicated persons or minors who subsequently cause death or injury to third parties in alcohol-related crashes.

designated driver programs discourage underage drinking by anyone under the age of 21. Recommendations made 10 or more times for Guideline 2E include (in descending order):

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
• Promote alternative transportation programs to discourage drinking by designated drivers and over-consumption by anyone.	22	5	23%
• Promote/continue/expand designated driver or other safe alternatives programs.	17	1	5%
• Ensure designated driver programs discourage underage drinking.	15	3	20%

III. GUIDELINE AREA 3 - DETERRENCE. NHTSA Highway Safety Program guidelines Provide that each State should implement a system of activities to deter impaired driving. The deterrence system should include legislation, public information and education, enforcement, prosecution, and adjudication. The goal should be to increase the perception and probability of arrest for violators and impose swift and sure sanctions.

A. ANALYSIS. Guideline Area 3 (Deterrence) contains five components: Laws to Deter Impaired Driving; Public Information and Education for Deterrence; Enforcement; Prosecution and Adjudication. As shown in **Table 5**, the assessments produced 1,238 recommendations, including 354 priority recommendations. **Appendix E** compiles the Deterrence recommendations.

Guideline Area 3 contains nearly 42 percent of all recommendations produced in the assessments, with numerous recommendations for each of the five Guideline Area 3 components (ranging from 151 to 389).

Areas 3C (Enforcement) and 3A (Laws to Deter Impaired Driving) each generated more than 300 recommendations and more than 25 percent of their recommendations were priority recommendations. While Areas 3D (Prosecution) and 3E (Adjudication) generated slightly fewer recommendations, their numbers were still large and each produced a significant portion (25 percent or more) of priority recommendations. Specifically:

- Area 3C (Enforcement) produced 31 percent of all Deterrence recommendations and 29 percent of Deterrence priority recommendations. Also, 27 percent (103 of 389) of 3C recommendations were priority recommendations.

- Area 3A (Laws to Deter Impaired Driving) produced 24 percent of all Deterrence recommendations and 34 percent of Deterrence priority recommendations. Also, 40 percent (120 of 301) of 3A recommendations were priority recommendations.

- Area 3D (Prosecution) produced 171 recommendations and 26 percent (44) of them were priority recommendations.

- Area 3E (Adjudication) produced 224 recommendations and 25 percent (55) of them were priority recommendations.

TABLE 5**NUMBER OF RECOMMENDATIONS FOR GUIDELINE AREA 3
DETERRENCE**

	Total Number of <u>Recommendations</u>	Number of Priority <u>Recommendations</u>	Percent that are <u>Priority</u>
3A - Laws to Deter Impaired Driving	301	120	40%
3B - Public Information and Education for Deterrence	151	30	20%
3C - Enforcement	389	103	27%
3D - Prosecution	171	44	26%
3E - Adjudication	<u>224</u>	<u>56</u>	<u>25%</u>
TOTAL GUIDELINE AREA 3 RECOMMENDATIONS	1238	354	29%

B. 3A - Laws to Deter Impaired Driving. Per NHTSA Highway Safety Guidelines, States should enact laws that define and prohibit impaired driving in broad and readily enforceable terms, facilitate the acquisition of evidence against impaired drivers and permit a broad range of administrative and judicial penalties and actions.

There were 301 recommendations for Guideline Area 3A produced in the assessments including 120 priority recommendations. In general, the recommendations for Guideline Area 3A involved: (1) defining impaired-driving offenses through the enactment or revision of laws; (2) providing effective penalties for impaired-driving offenses; and (3) providing for the effective enforcement of impaired-driving laws. Recommendations made 10 or more times for Guideline 3A include (in descending order):

	Total Number of <u>Recommendations</u>	Number of Priority <u>Recommendations</u>	Percent that are <u>Priority</u>
• Provide increasingly severe penalties for repeat or habitual offenders, driving with higher BAC, child endangerment, etc.	44	14	32%
• Recommendations to create body of law, revise or clarify language, close loopholes in the law, etc.	35	13	37%
• Enact legislation to set the <i>per se</i> BAC level at 0.08 for both criminal and administrative sanction.	33	22	67%
• Enact/continue/amend open container laws.	24	12	50%
• Require mandatory BAC testing.	22	4	18%
• Enact or revise law to provide for Administrative License Revocation or Suspension.	19	10	53%

• Provide for special penalty provisions for Youthful (Under Age 21) offenders.	16	5	31%
• Enact/revise Illegal Per Se Law for Drivers Under Age of 21.	14	9	64%
• Enact/revise law for DUI of Other Drugs or Impairing Substances.	12	6	50%
• Allow the use of alternative sanctions in sentencing.	12	3	25%
• Include implied consent provisions in law.	11	4	36%

C. 3B - Public Information and Education for Deterrence. Per NHTSA Highway Safety Guidelines, States should implement public information and education (PI&E) programs to maximize public perception of the risks of being caught and punished for impaired driving.

There were 151 recommendations, including 30 priority recommendations, produced in the assessments for Guideline Area 3B. In general, the recommendations involved: (1) developing or enhancing an overall Statewide PI&E plan; (2) developing or expanding Statewide PI&E plans with a specific theme; (3) building law enforcement and media relationships to enhance public awareness and (4) developing or expanding PI&E efforts that target specific high risk, cultural or ethnic groups. Recommendations made 10 or more times for Guideline 3B include (in descending order):

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
• Develop/coordinate Statewide PI&E plans.	18	10	56%
• Develop/expand/plan PI&E campaigns.	14	6	43%
• Build/improve law enforcement and media relationships.	14	1	7%
• Develop/expand PI&E efforts targeting high risk groups.	14	1	7%
• Expand PI&E campaign publicity efforts.	13	1	8%
• Educate the public on impaired driving.	11	4	36%
• Provide funding for PI&E efforts.	11	2	18%
• Develop PI&E efforts targeting specific groups (ethnic, cultural, regional, etc.)	10	1	10%

D. 3C - Enforcement. Per NHTSA Highway Safety Guidelines, States should implement comprehensive enforcement programs to maximize the likelihood of detecting, investigating, arresting, and convicting impaired drivers.

There were 389 recommendations, including 103 priority recommendations produced in the assessments for Guideline Area 3C. In general, the recommendations for Guideline Area 3C involved: (1) providing effective training for law enforcement personnel; (2) prioritizing/enhancing DUI enforcement; (3) providing adequate equipment or facilities to deal with impaired drivers; (4) enhancement of the DUI offender arrest/post-arrest process; and (5) maximizing offender/police contact. Recommendations made 10 or more times for Guideline 3C include (in descending order):

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
• Provide PBT's, Intoxilyzers to law enforcement officers (including funding, training, policies for use, etc.)	32	7	22%
• Enhance the DUI arrest process.	24	6	25%
• Provide adequate/increase DUI enforcement funding.	23	5	22%
• Conduct sobriety checkpoints, higher visibility, and/or saturation patrol efforts.	22	6	27%
• Improve/promote intergovernmental and/or interagency coordination, cooperation efforts.	22	6	27%
• Provide Standardized Field Sobriety Test training.	21	7	33%
• Provide Drug Evaluation/Recognition training.	21	3	14%
• Conduct multi-agency/jurisdiction DUI enforcement efforts.	20	7	35%
• Seek legislative support to enhance DUI enforcement efforts.	18	4	22%
• Improve data handling/evaluation of data.	18	1	6%
• Prioritize DUI enforcement activity.	17	11	65%
• Conduct enforcement efforts targeting underage drivers.	17	2	12%
• Provide DUI detection training to law enforcement officers.	17	8	47%
• Provide video/audio equipment to law enforcement officers (training, funding for, policies, etc.).	11	2	18%
• Establish/maintain Drug Evaluation and/or Classification Programs.	11	2	18%
• Law enforcement personnel (hiring, retaining, qualifications).	10	2	20%

E. 3D - Prosecution. Per NHTSA Highway Safety Guidelines, States should implement a comprehensive program for visible and aggressive prosecution of impaired-driving cases.

There were 171 recommendations produced in the assessments for Guideline Area 3D, including 44 priority recommendations. In general, the recommendations for Guideline Area 3D involved: (1) providing or improving DUI training and education for prosecutors; (2) speeding and strengthening the DUI prosecution process; (3) limiting or eliminating plea bargaining/charge reductions; and (4) providing adequate resources to prosecutor offices. Recommendations made 10 or more times for Guideline 3D include (in descending order):

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
• Provide or enhance DUI training and education for prosecutors.	37	5	14%
• Streamline/speed DUI prosecution efforts.	29	9	31%
• Strengthen DUI prosecution efforts.	12	1	8%
• Provide/increase prosecutor/hearing officer staffing resources.	10	2	20%
• Prohibit/limit the reduction of DUI charges.	10	3	30%

F. 3E - Adjudication. Per NHTSA Highway Safety Guidelines, the effectiveness of prosecution and enforcement efforts is lost without support and strength in adjudication.

There were 224 recommendations produced in the assessments for this guideline area, including 56 priority recommendations. Just over 20 percent of the recommendations involved providing educational or training opportunities to help judges and administrative hearing officers better or more appropriately adjudicate DUI cases. Other large groups of recommendations included: (1) making changes to judicial procedures or reorganizing court systems to enhance impaired-driving adjudication; (2) enhancing case management by providing adequate resources to court systems; (3) giving courts an effective option by providing sufficient resources to adequately staff probation and parole programs; and (4) improving court information and records systems. Recommendations made 10 or more times for Guideline 3E include (in descending order):

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
• Provide DUI training and education for judges and ALR officers to improve adjudication.	49	15	31%
• Changes to procedures to enhance the adjudication of DUI.	27	5	19%

• Revise State trial system structure.	19	7	37%
• Provide sufficient court resources for adjudication and case management.	18	5	28%
• Provide adequate staffing of probation and parole programs and resources to monitor programs.	16	5	31%
• Improve court information and records systems.	12	1	8%
• Develop/revise sentencing guidelines or alternatives.	10	0	0%

IV. GUIDELINE AREA 4 - DRIVER LICENSING. NHTSA Highway Safety Program guidelines provides that programs implemented by the motor vehicle agency can prevent or deter the incidence of impaired driving as well as effect the treatment and rehabilitation of impaired drivers.

A. ANALYSIS. Guideline Area 4 (Driver Licensing) contains three components: Prevention, Deterrence, and Program Management. As shown in **Table 6**, 345 recommendations were produced in this guideline area in the assessments and 106 were priority recommendations. **Appendix F** compiles all Guideline Area 4 recommendations.

Guideline Area 4 generated the second fewest number of recommendations, compared with other guideline areas. Within Guideline Area 4, Areas 4A (Prevention) and 4B (Deterrence) produced greater numbers of recommendations. In addition, a significant portion (25 percent or more) of the recommendations generated under Areas 4B (Deterrence) and 4C (Program Management) were priority recommendations. Specifically:

- Area 4A (Prevention - Driver Licensing) produced 39 percent of all Driver Licensing recommendations.

- Area 4B (Deterrence) produced 37 percent of all Driver Licensing recommendations and 38 percent of the recommendations were priority recommendations.

- Area 4C (Program Management) produced 25 percent of all Driver Licensing recommendations and 32 percent of the recommendations were priority recommendations.

TABLE 6**NUMBER OF RECOMMENDATIONS FOR GUIDELINE AREA 4
DRIVER LICENSING**

	Total Number of <u>Recommendations</u>	Number of Priority <u>Recommendations</u>	Percent that are <u>Priority</u>
4A - Prevention (Driver Licensing)	133	31	23%
4B - Deterrence	127	48	38%
4C - Program Management	<u>85</u>	<u>27</u>	<u>32%</u>
TOTAL GUIDELINE AREA 4 RECOMMENDATIONS	345	106	31%

B. 4A - Prevention (Driver Licensing). Per NHTSA Highway Safety Guidelines, each State should have a licensing/registration system that reinforces the deterrence and prevention of impaired driving and fosters the treatment and rehabilitation of impaired drivers.

There were 133 recommendations for Guideline Area 4A, including 31 priority recommendations. In general terms, most of the recommendations for this area fall into one of the following categories: (1) implement/adopt/revise/evaluate some form of a graduated drivers license, provisional, and/or restricted licensing program; (2) ensure DMV involvement in PI&E efforts; adapt/use driver license technology to enhance prevention efforts; (3) develop/enhance an administrative license revocation system; (4) improve driver education; and (5) develop/expand highway safety information system. Recommendations made 10 or more times for Guideline 4A include (in descending order):

	Total Number of <u>Recommendations</u>	Number of Priority <u>Recommendations</u>	Percent that are <u>Priority</u>
• Provide/implement a graduated driver/restricted/provisional licensing system.	24	7	29%
• Ensure/promote active DMV involvement in PI&E efforts.	17	1	6%
• Adopt driver license technology to reduce fraud, identify juvenile drivers, etc.	13	2	15%
• Develop or enhance existing administrative license revocation system.	11	2	18%
• Mandate/enhance driver training and education.	11	2	18%

C. 4B - Deterrence. Per NHTSA Highway Safety Guidelines, the State driver-licensing agency should support the passage and implementation of laws to deter impaired driving.

There were 127 recommendations for Guideline Area 4B, including 48 priority recommendations. In general, the recommendations for Guideline Area

4B involved enhancing the deterrence effect by: (1) providing for more severe administrative penalties; (2) enhancing the speed and efficiency of the administrative license revocation process; (3) developing a zero tolerance policy for drivers under age 21; (4) evaluating deterrence efforts; and (5) improving data reporting systems, availability and exchange. Recommendations made 10 or more times for Guideline 4B include (in descending order):

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
• Develop increasingly severe administrative penalties to enhance deterrence effect.	29	8	28%
• Improve/enhance the speed and efficiency of the administrative license revocation process.	25	12	48%
• Enact legislation to increase the deterrent effect on drivers under age 21.	19	10	53%
• Perform program evaluations/data analysis to support legislative arguments.	11	3	27%

D. 4C - Program Management. Per NHTSA Highway Safety Guidelines, the effective management of the motor vehicle agency primarily involves the use and dissemination of the information that the agency houses. Other factors that support the workings of the system must also be considered to operate at peak efficiency.

There were 85 recommendations for Guideline Area 4C, including 27 priority recommendations. Nearly 50 percent of these recommendations fell into two categories: (1) improving data exchange between DMV and court systems and (2) adopting a Statewide uniform traffic citation system. Recommendations made 10 or more times for Guideline 4C include (in descending order):

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
• Develop/improve data exchange between courts and DMV.	29	8	28%
• Adopt/implement Statewide uniform traffic citation including electronic citations and/or tracking.	13	6	46%

V. GUIDELINE AREA 5 - TREATMENT AND REHABILITATION. NHTSA Highway Safety Program guidelines provide that many first-time impaired-driving offenders and most repeat offenders have substantial substance abuse problems that affect their entire lives, not just their driving. They have been neither prevented nor deterred from impaired driving. Each State should implement a system to identify and refer these drivers to appropriate substance abuse treatment programs to change their dangerous behavior.

A. ANALYSIS. Guideline Area 5 (Treatment and Rehabilitation) contains two components: Diagnosis and Screening, and Treatment and Rehabilitation. As shown in **Table 7**, 196 recommendations were produced and 67 of the recommendations were priority recommendations. **Appendix G** compiles all of the Guideline Area 5 recommendations.

Guideline Area 5 generated the fewest number of recommendations, compared to the other guideline areas. However, a significant portion (25 percent or more) of recommendations for both Areas 5A (Diagnosis and Screening) and 5B (Treatment and Rehabilitation) were priority recommendations.

TABLE 7

**NUMBER OF RECOMMENDATIONS FOR GUIDELINE AREA 5
TREATMENT AND REHABILITATION**

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
5A - Diagnosis and Screening	28	9	32%
5B - Treatment and Rehabilitation	<u>168</u>	<u>58</u>	<u>35%</u>
TOTAL GUIDELINE AREA 5 RECOMMENDATIONS	196	67	34%

B. 5A - Diagnosis and Screening. Per NHTSA Highway Safety Guidelines, each State should have a systematic program to evaluate persons who have been convicted of an impaired-driving offense to determine whether they have a significant alcohol or drug use problem.

There were 28 recommendations for Guideline Area 5A, including 9 priority recommendations. The majority of these recommendations involved developing or providing a screening mechanism for DUI offenders. Recommendations made 10 or more times for Guideline 5A include (in descending order):

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
• Develop/provide a screening mechanism for DUI offenders.	16	5	31%

C. 5B - Treatment and Rehabilitation. Per NHTSA Highway Safety Guidelines, each State should establish and maintain programs to treat alcohol- and other drug-impaired persons referred through traffic courts and other sources.

There were 168 recommendations for Guideline Area 5B, including 58 priority recommendations. In general terms, most of these recommendations fell into one of several categories, including: (1) provide offenders, including youths, with appropriate treatment access; (2) perform evaluations of assessment and treatment programs; (3) develop and implement a client tracking system; (4) develop and use standard treatment guidelines and

criteria; and (5) provide adequate resources for treatment programs. Recommendations made 10 or more times for Guideline 5B include (in descending order):

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
• Evaluate assessment/treatment programs.	24	5	21%
• Develop/implement a DUI client tracking system.	16	8	50%
• Provide offenders with access to treatment and/or education programs.	14	5	36%
• Create task forces to explore variety of treatment and rehabilitation issues.	11	5	45%
• Ensure availability of appropriate alcohol and drug treatment/rehabilitation for youthful offenders.	11	6	55%
• Provide adequate funding for treatment programs.	10	4	40%
• Use of standard criteria for determining treatment and rehabilitation needs.	10	2	20%

SECTION THREE - CONCLUDING REMARKS

I. STUDY LIMITATIONS. It should be noted that there are inherent limitations to this retrospective review and compilation of assessment recommendations. Data for this study consists solely of recommendations produced in the impaired-driving assessment reports. Each assessment took place within a limited time frame (one week) and assessment team recommendations were based on the information provided to them. This review does not account for any changes that may have taken place in the various State impaired-driving programs since the original assessments. This effort did not seek to determine whether the assessment process was responsible for changes to a State's impaired-driving program. More specific information related to the recommendations and associated outcomes would be needed to evaluate the impact of the assessment process.

This study was an effort by a single reviewer to subjectively categorize and then quantify a very large number of varied assessment team recommendations that were produced in the assessment reports. There has been no evaluation of this single reviewer's interpretation of the recommendations. The reviewer's categorization effort was complicated by several factors.

First, while assessment team members used the guidelines for each assessment, the sheer complexity and variety of State impaired-driving programs and the different State environments in which they exist, led to an extremely wide variety of recommendations. Second, each of the five guideline areas contains several components (altogether 21 different components) and there was a wide variety of recommendations within each of

the components, so the reviewer had to create "sub-categories" within each component. The reviewer used his interpretation and judgment to decide to which "sub-category" the individual recommendation belonged. The reviewer also developed multiple "themes" for the recommendations within each guideline area based on his judgment. Third, many of the recommendations were very lengthy, contained legal or technical language, or both. Many recommendations were similar, but contained dissimilar wording. In addition, a large number of recommendations were "compound" and actually contained multiple recommendations. Further, the scope of the recommendations varied considerably, ranging from Statewide recommendations to those involving a specific locality or even employer.

Finally, it should be noted that there was no attempt to compare the State re-assessments to the original assessments. There were several reasons for this. First, the primary purpose for each assessment and subsequent re-assessment was to identify weaknesses or deficiencies as compared to the standard and make recommendations for improvement. Second, each assessment and re-assessment reflects the views of a different assessment team and is considered a standalone snapshot of the current status of a State's impaired-driving program. Third, it could not be determined that any post-assessment changes made to a State's impaired-driving program could be attributed to the previous assessment. There are no attempts to penalize a State if assessment recommendations are not followed.

II. SUMMARY. The Statewide impaired-driving assessment process has been employed 42 times (32 assessments and 10 re-assessments) through October 2003. Assessment recommendations draw attention to critical needs and problem areas for each State. There were 2,982 recommendations produced in the assessment reports and this study effort was an attempt to sort, categorize and quantify those recommendations for each of the guideline areas and their respective components. The sheer number and wide variety of assessment recommendations indicate that most, if not all, of the assessed States have significant needs regarding their impaired-driving programs. Large numbers of recommendations and high percentages of priority recommendations within a guideline area may reflect overall importance and breadth of its various components. It should not be assumed that a particular guideline area is strong or weak based solely on the number of recommendations regarding the area.

Despite the complexity of categorizing the myriad of recommendations, most of them could be applied to one of several large thematic areas (see Table 8). Most of the guideline areas contained recommendations matching these themes. It is recommended that this compilation of recommendations be used to highlight those guideline areas and components with a preponderance of recommendations and to help illuminate those areas where perhaps there have been fewer recommendations made. This could help focus attention on specific problem areas, identify where future attention should be given and help establish new, or revise existing, guideline areas and components. It is hoped that this compilation of assessment recommendations will assist the Impaired-driving Division of the Office of Impaired-driving and Occupant Protection in enhancing assessments of State impaired-driving programs in the future.

TABLE 8**NUMBER OF RECOMMENDATIONS BY GENERAL CATEGORIZATION (OR THEME)**

	<u>Total Number of Recommendations</u>	<u>Number of Priority Recommendations</u>	<u>Percent that are Priority</u>
Increase deterrence effect by prioritizing enforcement and by enhancing arrest, prosecution, and adjudication processes.	470	156	33%
Provide/increase PI&E efforts for DUI prevention and deterrence.	370	82	22%
Remedy DUI data/records problems (e.g., accessibility, offender tracking systems, data linkages, data reporting, etc.).	352	106	30%
Create/revise laws and other legislative efforts to increase DUI deterrence.	344	136	40%
Increase/enhance training for law enforcement, prosecution, and judicial personnel.	259	73	28%
Strengthen DUI prevention efforts by creating new, or revising existing laws and other legislative efforts to strengthen prevention.	215	72	34%
Evaluate impaired-driving programs and activities.	211	47	22%
Provide sufficient treatment and rehabilitation resources (screening, diagnosis, facilities, personnel).	138	55	40%
Improve inter/intra-governmental coordination and cooperation regarding DUI efforts.	136	51	38%
Funding-related recommendations to provide adequate resources and/or promote self-sufficiency efforts.	118	44	37%
Develop/increase number of task forces or increase community involvement	117	30	26%